

EXCEPTIONAL CARE RESPITE WITH ROOM AND BOARD INCLUDED (RP5)

General Description:

Exceptional Care Respite with Room and Board included for persons with exceptional medical or behavioral needs (RP5) provides one-on-one and group daily and overnight care to give relief to, or during the absence of, the normal caregiver. RP5 is usually provided in a facility-based program approved by DHS/DSPD but may be provided in the private residence of the RP5 provider and is never provided in the person's home. RP5 includes payment for room and board. RP5 provides services for persons with exceptional medical or behavioral care needs, or who may require specialized equipment.

Services are available through Provider-Based Services.

Limitations:

The provision of RP5 in terms of duration and location will be based on the annual amount allocated by the DHS/DSPD's Region to the person/family and the person/family's preference. This code does include payments for room and board when provided as part of respite care in a facility approved by the State that is not the person's private residence.

In no case will more than four persons be served in a provider's home setting including the provider's own minor children under the age of 14; nor will more than six persons per staff member be served in facility-based settings.

Population Served:

The Contractor will serve people currently receiving services from DHS/DSPD with mental retardation and related conditions (MR.RC), and acquired brain injury (ABI), as defined in Utah Administrative Code R539-1. <http://rules.utah.gov/publicat/code/r539/r539.htm>

Contractor's Qualifications:

Contractor must have all applicable licenses as prescribed in Utah Administrative Code R501 <http://rules.utah.gov/publicat/code/r501/r501.htm> to operate and provide the particular type of services being offered and comply with insurance requirements and any local ordinances or permits governing the type of service provided.

Contractor must be enrolled as an approved Medicaid Provider with the Utah Department of Health and agree to allow DHS/DSPD to bill Medicaid on its behalf for covered Medicaid services included in the rate paid by DHS/DSPD to the Contractor. Contractor must also agree to participate in any DHS/DSPD provided Medicaid training.

Staff Qualifications:

All staff must demonstrate competency (in the services covered by the contract), as determined by the Contractor, in addition all applicable education, and training must be completed before the delivery of any supports to persons and performing any work for persons without supervision.

The Contractor must ensure that Respite staff are trained in the Staff Training Requirements as outlined in applicable Home and Community Based Waiver, rule, statute, and contract.

Specific Training Requirements

All direct care and direct care supervisory staff shall receive specific staff training that prepares them to perform the critical job functions for this service and orients them to the person being supported by this service. Training shall be conducted by qualified trainers with professional experience and knowledge in providing services and supports to persons with mental retardation, related conditions and brain injury.

Staff shall complete and achieve competency in specific training areas 1 through 8 within 30 days of employment or before working unsupervised with a person. Competency for RP4 staff may include knowing where to find information or who to contact in case of a question or unusual event.

EXCEPTIONAL CARE RESPITE WITH ROOM AND BOARD INCLUDED (RP5)

1. Medication competency:
 - a. Identification of medications and medication side effects specific to the person, and
 - b. Recording and documentation of self-administration of medications,
2. Recognition of illness or symptoms of health deterioration specific to the person.
3. Dietary issues specific to the person.
4. Critical health care issues specific to the person.
5. Swallowing and eating difficulties specific to the person.
6. Preferences and non-negotiable routines specific to the person.
7. Significant functional limitations and disabling conditions specific to the person.
8. Contractor and Contractor's staff providing ABI services shall demonstrate competence or awareness in the following areas:
 - a. Effects of brain injuries on behavior,
 - b. Transitioning from hospitals to community support programs including available resources,
 - c. Functional impact of brain changing,
 - d. Health and medication,
 - e. Role of the direct care staff relating to the treatment and rehabilitation process,
 - f. Treatment plan and behavioral supports, and
 - g. Awareness of the Family's perspective on the brain injury.

Direct Service Requirements:

- A. **Person-Centered Planning:** Contractor staff shall participate in and comply with the requirements of the DHS/DSPD Person-Centered Planning Process in providing services.
 1. The Contractor is responsible for implementing the applicable portion of the Individual Support Plan's Action Plan (ISP/AP). The ISP document may include the following separate documents: Action Plan, Support Strategies, including Behavior Support Plan, Psychotropic Med Plan, Staff Instruction sheet, data collection and/or Task Analysis sheet.
 2. Once the ISP/AP has been developed, the Contractor must orient the person to the portion of the plan that pertains to the Contractor and ensure the person is involved in its implementation.
 3. The Contractor shall develop Support Strategies for the person. Contractor shall submit Support Strategies and Monthly Summaries to DHS/DSPD.
 4. The Contractor, as a member of the person's Team, is required to meet at least annually (within 12 months of the last Person Centered Process meeting) to review the person's service/support requirements and to make adjustments as necessary based on the person's needs. However, it may meet more often as determined by the person or other members of the team.
- B. Certain medical services are limited as to the Contractor's skill level and professional licensure. The specialized respite Contractor will be trained in DHS/DSPD approved behavior management techniques and crisis management services.

Staff Support:

RP5 staff shall have expertise in provision of care to persons with exceptional medical and/or behavior issues. Actual type, frequency and duration of support will be defined in the person's ISP/AP based on the person's assessed needs. Contractor shall serve no more than four persons at any one time including the provider's own minor children under the age of 14, in the case of services provided in the provider's home setting, Services provided in a facility based setting shall serve no more than 6 persons per staff member at any one time.

Rate:

RP5 includes payment for room and board charges. RP5 includes payment for exceptional care needs. RP5 includes a daily rate only.

RP5 day rate is for 6 hours or more of respite services. For overnight stays, a Contractor may bill for the day the person came and not the day the person left if the person is there less than 6 hours. The person must have a full 6 hours stay to qualify for a daily rate.

Personal belongings (clothing, personal hygiene products) and medicine must be provided for and accompany the person and the Contractor is not responsible to provide these accommodations.